PTO/SB/22 (07-09)

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | Docket Number (Optional) 1982-0316PUS1 | |
|---|-------------------|---|--------------|
| Application Number 10/594,737-Conf. #5298 | | Filed | July 9, 2007 |
| For DISPLAY APPARATUS | | | |
| Art Unit 2879 | | Examiner | A. T. Perry |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| | <u>Fee</u> | Small Entity Fee | į |
| X One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$130.00 |
| Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ |
| Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ |
| Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ |
| Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. | | | |
| A check in the amount of the fee is enclosed. | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | |
| X The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to | | | |
| Deposit Account Number 02-2448 | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | |
| I am the applicant/inventor. | | | |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | |
| x attorney or agent of record. Req | gistration Number | 40,439 | <u> </u> |
| attorney or agent under 37 CFR 1.34. | | | |
| Registration number if acting under 37 CFR 1.34 | | | |
| _ Cersell 4 | 5/2 | January | / 11, 2010 |
| Signature | | Date | |
| D. Richard Anderson | | (703) 205-8035 | |
| Typed or printed name | Telephoi | ne Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| X Total of 1 forms are subm | itted. | | |